FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) American Association of Cosmetology Schools Political Action Committee (AACS PAC) 9927 East Bell Road ADDRESS (number and street) **STE 110** (Check if address is changed) Scottsdale 85260 ΑZ CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS PACadmin@aacs-pac.org (Check if address is changed) Optional Second E-Mail Address anthony@beautyschools.org COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2017 C00656546 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Perisco, Dana, , , Type or Print Name of Treasurer Perisco, Dana, , , [Electronically Filed] 02 2021 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FEC E	orm 1 (Revised 02/2009)	Page 2
	COMMITTEE	i aye Z
Candidat	e Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	ion Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co		
(d)		(Democratic, Republican, etc.) Party
Political A	Action Committee (PAC):	
(e) x	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected organization is
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated fund or part
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fun	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
Con	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number C	
3.	FEC ID number C	
4.		

FEC Form 1 (Revised 0	2/2009)		Page 3
Write or Type Committee Name	2/2003)		i age 3
• •	on of Cosmetology School	ols Political Action (Committee (AACS PAC)
			· · · · · · · · · · · · · · · · · · ·
-	rganization, Affiliated Committee, Jo	oint Fundraising Representati	ve, or Leadership PAC Sponsor
American Association	of Cosmetology Schools		
Mailing Address	9927 East Bell Road		
J	Ste. 110		
	Scottsdale	AZ	85260
	CITY	STATE	ZIP CODE
_		_	_
Relationship: X Connected	Organization Affiliated Committee	Joint Fundraising Represe	ntative Leadership PAC Sponsor
 Custodian of Records: Identification books and records. 	rify by name, address (phone number	optional) and position of the	e person in possession of committee
Perisco, Da	ına, , ,		1
Full Name	ıc/o AACS		
Mailing Address	9927 E Bell Rd. Suite 110		
			05000
	Scottsdale	AZ	85260
Title or Position	CITY	STATE	ZIP CODE
Treasurer		Telephone number	480
Treasurer: List the name and any designated agent (e.g., as	address (phone number optional) c ssistant treasurer).	of the treasurer of the committ	ee; and the name and address of
Full Name Perisco, Da	na, , ,		ı
of Treasurer	ıc/o AACS		
Mailing Address			
	9927 E Bell Rd. Suite 110		
	Scottsdale	AZ	85260
Title or Position	CITY	STATE	ZIP CODE
Treasurer		Telephone number	480 - 281 - 0431

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Full Name of Designated Agent Cram	mp, Edward, M, ,	
Mailing Address	750 B Street	
	Suite 2900	
	San Diego CA 9210 CITY STATE	ZIP CODE
Title or Position Administrator	Telephone number 619 –	744 2223
safety deposit boxes or	r maintains funds.	
safety deposit boxes or Name of Bank, Deposit	itory, etc.	
Name of Bank, Deposit	itory, etc.	
Name of Bank, Deposit	itory, etc. OK 7000 EAST MAYO BLVD	
Name of Bank, Deposit	7000 EAST MAYO BLVD No 22	ZIP CODE
Name of Bank, Deposit	Phoenix CITY STATE	
Name of Bank, Deposit BO Mailing Address	Phoenix CITY STATE	
Name of Bank, Deposit Mailing Address Name of Bank, Deposit	Phoenix CITY STATE	
Name of Bank, Deposit BO Mailing Address	Phoenix CITY STATE	
Name of Bank, Deposit Mailing Address Name of Bank, Deposit	Phoenix CITY STATE	